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#### **ABSTRACT:**

Effective communication is vital to nursing, especially in healthcare settings where telephonic interaction frequently functions as an essential instrument for emergency consultations, patient updates, and inter-professional exchanges. This case study examines a scenario-based training method designed to improve telephonic communication skills in final-year Bachelor of Science in Nursing (BSc Nursing) students. The training simulation replicated authentic healthcare scenarios, encompassing emergency reporting, patient transfer coordination, and interactions with professionals, inside a controlled, immersive setting. Fifty students engaged in practice, organized into five groups to simulate ten unique communication scenarios, with roles designated for callers, receivers, and observers. The activity spanned two days, allowing for reflective feedback and enhancement of skills. Faculty evaluation emphasized significant advancement in students' capacity to communicate essential information succinctly, especially in high-stress situations. Students indicated a heightened comprehension of the subtleties of telephonic communication, particularly regarding clarity, conciseness, and the efficient expression of urgency. This study's findings emphasize the significance of simulation-based training in developing vital communication skills, providing critical insights for incorporating telephonic communication training into nursing curriculum to enhance patient care and safety.

**Key words: Telephonic Communication, Scenario-Based Training, Effective Communication Skills, Simulation Training Techniques and Communication Barriers** 

#### **INTRODUCTION:**

Nursing, as a healthcare discipline, emphasizes addressing the needs of individuals as biopsychosocial and spiritual entities. According to Kourkouta and Papathanasiou (2014), its practice necessitates not just scientific knowledge but also interpersonal, intellectual, and technological competencies and skills. This signifies a synthesis of knowledge, therapeutic practice, and interpersonal communication Cuest.fisioter.2025.54(4):6083-6093

# TELEPHONIC COMMUNICATION: A CASE STUDY ON SCENARIO-BASED TRAINING



. Communication is essential for the survival and maintenance of human life. Human relationship progresses through communication. Health care communication forms serve as the foundation for evaluation, diagnosis, treatment, and follow-up. Effective communication is fundamental to healthcare, facilitating the seamless provision of patient care, delivering timely and precise information, and improving patient outcomes. Telephonic communication is particularly vital in healthcare environments, since it is often employed for urgent issues, consultations, and follow-ups.

Maben et al. (2006) reported that telephonic communication is integral to nurses' professional duties and personal lives, significantly influencing patient care and professional development. Research consistently indicates that newly graduated nurses encounter difficulties in connecting with colleagues, engaging in organisational talks with hospital staff, and managing telephone enquiries. O'Shea and Kelly (2007), listed certain duties as challenging for novice nurses: organising investigations and referrals, contacting specialised clinical nurses and other healthcare professionals such as dietitians and physiotherapists, scheduling tests, and ordering things from the pharmacy. Several studies (González-Martínez et al, 2018; Krautscheid, 2008) indicate that nurse training programs have begun to include instruction on interprofessional communication, occasionally emphasising telephone interactions.

Scenario-based learning, also known as scenario-based training, immersive training, or simulation-based learning, is where a learner is given the opportunity to develop a skill by practicing in a true-to-life simulated environment that replicates job conditions. Simulation-based learning provides an approximation of practical experience, mitigates the constraints of real-life learning scenarios, and serves as an excellent method for cultivating intricate abilities. Cook et al. (2013) proposed a more precise definition, stating that simulation is a educational tool or device with which the learner physically interacts to mimic real life, highlighting the necessity of interacting with authentic objects. Grossman et al. (2009) state that simulation may be seen as a simplified representation of practice, facilitating the engagement of novices in activities that closely resemble professional practices.

Simulation-based learning facilitates the integration of real-world scenarios into educational institutions. Students can assume certain responsibilities and engage actively in a simulated professional environment. Henninger et al. (2000) research has shown that full authenticity



is not always beneficial for learning Researchers therefore typically emphasize the opportunity to modify reality for learning purposes with simulated environments. Allen et al. (1999) emphasise the necessity of evaluating the degree to which simulation accurately reflects real practice, specifically regarding the constraints placed on the learner, the characteristics of the replicated scenario, and the environment and/or people involved.

Scenario-based simulation offers several benefits. At first, as an educational technique, it enables the student to develop knowledge, abilities, and attitudes in reaction to a simulated clinical experience. By simulating key elements of a clinical scenario, the learner is provided with the time and opportunity to comprehend the components within a laboratory environment, hence enhancing their ability to manage the issue when it arises in clinical practice (Hovancsek, 2007; Gaba,2004). According to Shiner, (2018) the use of scenario-based simulation enables learners to develop emotional skills, including problem-solving, decision-making, communication, and empathy, so facilitating students' transition into their professional roles. Kardong-Edgren et al. (2009) states that, simulation-based education enables faculty to assess learning outcomes in the emotional domain by determining if students exhibit the information, abilities, and attitudes that impact their professional conduct.

Effective telephone communication is an essential skill for nursing students, especially in critical circumstances or when precise instructions are necessary. Consequently, nursing programs have progressively incorporated communication skill development lessons into their curriculum to adequately prepare students for these problems.

INTEGRATING COMMUNICATION SKILLS INTO THE NURSING CURRICULUM

Nursing Curriculum provides a comprehensive and integrated approach to teaching communication skills, covering various aspects throughout the program. In the Bachelor of Science in Nursing (BSc Nursing) program, communication skills are taught in a progressive manner across different semesters to ensure students develop proficiency in various aspects. The communication components of the curriculum are outlined as follows:

- Foundational Communication Skills:
  - o **First Semester:** Introduction to Communication (1 unit)
  - o Fifth Semester: Communication and Education Technology (separate subject)
- Specialized Communication Skills:
  - o Mental Health Nursing: Therapeutic Communication



- o Community Health Nursing: Information, Education, and Communication (IEC)
- Advanced Communication Skills:
  - Final Year (Management): Group Dynamics, Collective Bargaining, Conflict Management

This spiral curriculum approach enables learners to progressively enhance their communication skills, moving from foundational concepts to more intricate aspects. By the end of the program, students are equipped with a 360-degree understanding of communication, preparing them for effective interactions in diverse healthcare settings.

Students should be trained in communication skills, with real-time experience provided, particularly in the context of emerging technologies such as telenursing and telecommunication. Telehealthcare services have become vital, and it is crucial that healthcare team members are effectively prepared to communicate across various modes and platforms.

This case study examines a scenario-based telephonic communication training exercise aimed at enhancing the skills of final-year BSc Nursing students in managing various telephonic situations within and outside healthcare environments. The training focused on highlighting the significance of effective, succinct, and professional communication in managing real-world situations that nurses may encounter.

#### **Objectives**

- To improve the telephonic communication skills of BSc Nursing students.
- To simulate real-life scenarios requiring clear, concise, and effective communication.
- To provide constructive feedback for enhancing communication techniques.

## SIMULATION-BASED TRAINING FOR TELEPHONIC COMMUNICATION SKILLS:

## **Participants:**

The simulation exercise involved 50 final-year BSc Nursing students, divided into 5 groups of 10 students each. The students were assigned to different roles during each scenario—Callers and Receivers.

### **Duration of the Session:**

A two-day training session, each lasting 2 hours, was provided to enhance telephonic communication skills.

## **Scenario-Based Training:**

# TELEPHONIC COMMUNICATION: A CASE STUDY ON SCENARIO-BASED TRAINING



A total of 10 distinct telephonic communication scenarios were created, each simulating real-world healthcare situations. The scenarios covered various aspects of telephonic communication, including reporting emergencies, giving directions, and relaying critical patient information. On the first day, five scenarios were practiced, followed by an additional five scenarios were practiced one week later, focusing on refining communication and clarity.

### **Exercise Setup**

#### a.Rooms Setup:

Each scenario was conducted in two separate rooms: one for the **Caller Group** and one for the **Receiver Group**. The faculty acted as a passive observer in each session, observing the communication process and providing feedback afterward. Totally 10 rooms were used for two days.

## **b.Role Assignment:**

- Caller (Volunteer): The individual who initiates the communication and conveys the necessary information based on the scenario.
- **Receiver (Volunteer)**: The individual who listens to the information, understands the situation, and responds accordingly.
- **Observers**: The remaining participants who observe the communication process without taking part in the conversation.

#### c. Instruction:

A caller volunteer was selected in each group, given the scenario script, and briefed on their role. Both the caller and receiver volunteers in each group were instructed to turn on the speakerphone on their mobiles and begin the conversation based on the scenario.

### d.Scenario:

The following 10 scenarios were included:

- 1. **Scenario:** You are working in the ICU and are assigned a patient on a ventilator. You notice ventricular tachycardia on the cardiac monitor.
  - Question/Activity: Make a call to the intensivist.
- 2. Scenario: Responding to a patient in an emergency: Mr. X, a 58-year-old male, is admitted in the male medical ward for appendectomy surgery. He suddenly experienced severe chest pain, described as crushing and squeezing, radiating to his left arm and jaw. The pain is associated with sweating and shortness of breath. He denies any prior episodes of similar pain. Vital Signs: BP: 160/90 mmHg, HR: 110 bpm, RR: 22/min, SpO2: 97%.

  Question/Activity: Consider this an emergency. How will you convey this information to the doctor?
- **3. Scenario:** Arranging an anesthetic appointment: Mrs. X is scheduled for a hysterectomy surgery. As part of the preoperative care, you need to arrange an appointment with the anesthetist for a preoperative assessment.

# TELEPHONIC COMMUNICATION: A CASE STUDY ON SCENARIO-BASED TRAINING



**Question/Activity:** How will you make a telephonic conversation with the anesthetist to arrange the appointment?

- **4. Scenario:** Calling the professor for assignment clarification after working hours: You have a question about an upcoming assignment and need to ask your professor for clarification after college working hours.
  - Question/Activity: Make a call. How will you interact with the professor?
- **5. Scenario:** A patient attempted suicide in the ward: Mr. X, admitted in the psychiatric ward with a diagnosis of substance abuse, has attempted suicide in the ward.
  - **Question/Activity:** How will you communicate the patient's death to the Nursing Superintendent through a telephonic conversation?
- **6. Scenario:** Patient Transfer: A patient recently transferred to your hospital for renal transplantation requires their medical records from the previous hospital.
  - **Question/Activity:** Could you contact the previous hospital to request the patient's medical records?
- 7. **Scenario:** You are a staff nurse in the recovery room. You have received a patient following exploratory laparotomy. The patient's urine output for the past 2 hours has been 10 ml. You are calling the surgical unit doctor to inform him.
  - **Question/Activity:** Consider this an emergency. How will you convey this information to the respective doctor?
- **8. Scenario:** You have ordered from Amazon to the college address. The delivery person is calling you and asking for directions.
  - **Question/Activity:** Give directions to the delivery person who is calling about the Amazon order sent to the college address.
- 9. Scenario: You are not feeling well and are calling your class teacher to request leave. Question/Activity: Make a call to inform the concerned teacher about your leave.
- **10. Scenario:** You have not completed your log book, so your hall ticket is on hold and your parents are asked to come.

Question/Activity: Call your parents to inform them about the issue.

#### **SIMULATION PROCESS:**

1. Preparation
-> Assign 10 students per group (5 in Caller group, 5 in Receiver group)
-> Assign Caller and Receiver Volunteers
-> Provide Scenario Script and Brief
2. Simulation Process
—> Caller and Receiver turn on speakerphone
-> Initiate communication based on assigned scenario

# TELEPHONIC COMMUNICATION: A CASE STUDY ON SCENARIO-BASED TRAINING



└─> Observers listen to the conversation
3. Post-Simulation Reflection
—> Caller and Receiver discuss communication process
—> Students share their viewpoints
-> Faculty debrief on strengths, weaknesses, improvements
4. Scenario Execution
-> All scenarios take place simultaneously
L-> Each group follows their designated scenario without exchanging roles or scenarios

### **Debriefing and Reflection**

After each simulation, the groups assembled for a debriefing session. During this session:

- The Callers and Receivers reflected on their communication experience, discussing challenges, strengths, and areas for improvement.
- The **Observer Group** shared their feedback based on what they had observed.
- Faculty members provided constructive feedback, focusing on the clarity of information, professionalism, urgency (where required), and the overall effectiveness of the communication.

The feedback session also included discussions on improving the use of tone, pacing, and clarity during telephonic communication, especially in emergency situations. Faculty helped guide students to recognize the importance of clear and concise messaging, and how to effectively communicate with limited time and without visual cues.

#### STUDENT FEED BACK AND FACULTY FEED BACK:

### **Faculty Feedback:**

Faculty observed an improvement in communication skills while performing the task in the second day. Initially, callers tended to underestimate the seriousness of certain situations, especially in emergency scenarios, and failed to convey critical information effectively. However, with practice, the clarity and urgency of communication improved.

#### **Student Feedback:**

Students expressed that the telephonic communication exercise was valuable in understanding the dynamics of emergency and routine calls. Some students noted the challenges in maintaining brevity and clarity during emergency calls, while others found it difficult to convey urgency over the phone.

#### Here are some student reflections:

# TELEPHONIC COMMUNICATION: A CASE STUDY ON SCENARIO-BASED TRAINING



- "The telephonic conversation exercise was a great idea. It provided exposure to new circumstances and helped me understand how to communicate more effectively, recognizing the importance of adapting to the situation. Continuous practice would allow us to handle similar situations in the future with better clarity and ease."
- "The telephonic conversation was a valuable experience. Through this, I learned how to communicate concisely during emergencies and how to interact when the receiver is unaware of the situation. It also helped me understand the barriers to telephonic communication. This exercise was very useful."
- "It was a cherished learning experience. We have all reached a point of self-realization."
- "This exercise was very useful in helping us assess our current communication skills. We are trying to improve, and this practice will help us develop further. If these telephonic conversations were conducted on a weekly basis, it would be even more beneficial."
- "It was very informative. The exercise gave me a clearer idea of how to communicate effectively and handle different situations. It also highlighted where I stand in terms of communication skills. This practice was invaluable, providing insight into how to manage various scenarios and identify areas for improvement. The self-analysis and feedback from the teachers were crucial in recognizing how to approach situations more effectively. It was truly useful."

#### **Results and Discussion**

The simulation exercise successfully highlighted several key aspects of telephonic communication and provided valuable insights into the strengths and weaknesses of student communication skills. Some of the key findings include:

### 1. Clear Communication and Brevity:

- Many students struggled initially with conveying critical information quickly and concisely, especially in emergency scenarios. In high-pressure situations, students often provided excessive detail or did not emphasize the urgency of the situation effectively.
- With practice, students became more adept at communicating important information in a concise manner.

### 2. Professionalism and Empathy:

o In non-emergency scenarios, students generally maintained professionalism, but the challenge was balancing empathy and professionalism in more routine calls (e.g., leave requests, assignment clarifications).

# TELEPHONIC COMMUNICATION: A CASE STUDY ON SCENARIO-BASED TRAINING



In emergency scenarios, some students found it challenging to convey empathy
while maintaining urgency. This aspect of communication was emphasized during
the feedback sessions.

#### 3. Role of Observers:

The Observer Group played a crucial role in providing feedback, as they could view
the entire communication process and identify areas that the Callers and Receivers
may have missed. Their insights helped improve the quality of the simulations over
time.

### 4. Importance of Feedback:

The debriefing and feedback sessions were instrumental in improving communication skills. By reflecting on the simulation and receiving constructive feedback from faculty and peers, students were able to identify their communication gaps and work on addressing them in future exercises.

The findings of our study align well with existing literature on the effectiveness of scenario-based simulation in improving healthcare students' skills and confidence. Similar to the study by Kloc et al. (2018) on sonography students, our case study demonstrates that simulation exercises significantly enhance students' confidence in telephonic communication, a critical but often underemphasized skill in healthcare education. In their study, sonography students showed increased confidence in key aspects of patient care, such as explaining procedures and handling negative outcomes, following simulation training. Likewise, our study revealed that nursing students' confidence grew substantially after engaging in scenario-based telephonic communication, particularly in situations involving emergency reporting, giving directions, and relaying critical patient information. Both studies underscore the importance of using realistic, context-driven simulations to help students bridge the gap between theoretical knowledge and practical application.

Effective communication is crucial in nursing, particularly during emergencies. Research indicates that nursing students often face challenges in conveying critical information succinctly under pressure. A study published by Kordkolaee et al. (2023) highlights that emergency nurses perceive various barriers to effective communication, which can impede patient care. Muller et al. (2020) stated that to address these challenges, structured communication tools like SBAR (Situation, Background, Assessment, Recommendation) have been implemented. SBAR enhances communication among healthcare professionals, leading to improved patient safety.

## **CONCLUSION:**

This innovative training exercise enabled students to develop essential telephonic communication skills, receive feedback, and reflect on their experiences. The telephonic communication training exercise successfully enhanced the communication skills of final-year BSc(N) students by simulating real-world healthcare scenarios. The simultaneous execution of all scenarios provided a dynamic learning environment, enabling real-time observation and feedback. Students were able to reflect on their communication styles, identify areas for improvement, and gain valuable insights into the

# TELEPHONIC COMMUNICATION: A CASE STUDY ON SCENARIO-BASED TRAINING



nuances of telephonic interaction in healthcare settings. The faculty feedback highlighted the progress made by students from one scenario to the next, particularly in their ability to convey critical information effectively. Overall, the training proved to be an effective method of improving communication skills, equipping students with the tools necessary to handle real-life healthcare situations confidently and competently.

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# TELEPHONIC COMMUNICATION: A CASE STUDY ON SCENARIO-BASED TRAINING



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